

nates at the end of two or three days, at others it continues for a longer or shorter period.

In Paris, during the epidemic of the present spring, the influenza terminated favourably in the great majority of cases. Where death occurred, it was the result of complications, such as pneumonia, general bronchitis, &c. It was, however, a very serious disease when it attacked those labouring under chronic inflammation of the chest.

Dissection has not discovered in the bodies of those who died of the disease, other lesions than those referable to the disease with which the influenza was complicated.

M. Andral does not consider the influenza to be either a laryngitis, tracheitis, or pulmonary catarrh; either of these affections may occur in patients labouring under the disease, and constitute one of the principal elements of the disease, but they do not constitute of themselves the influenza. This is a general disease, the nature and course of which, as in most of the epidemic affections which occur at variable intervals, are both unknown.

The treatment will vary according to the symptoms. When indications of cerebral congestion, with more or less febrile excitement present themselves, we should not hesitate to open a vein, and at the same time apply revulsives to the extremities. If the fever is moderate, the pain in the head inconsiderable, and the oppression slight, rest and diluent drinks will be sufficient. If the mouth is pasty or bitter, the tongue foul, and more or less aversion from food is present, with a sensation of weight at the epigastrium, emetics 18 to 24 grains ipecac. or two of tartar emetic, may be given with great advantage. If the cough is dry, painful, and fatiguing, narcotics, as belladonna and opium, should be prescribed.

If in the second period any particular symptom manifests itself, we should insist upon an attention to regimen, and the use of mucilaginous drinks. In the third period, if the symptoms of stomacic or intestinal disorder predominate, vomits, or still better, purgatives will succeed in removing it. During convalescence, it has been found necessary to restore tone to the stomach by the use of bitters and tonics.

46. *Debate in the Academy of Medicine of France relative to the Influenza.* February 14, 1837.—M. LEPELLETIER de la Sarthe, having charge of the *Bureau Central*, and supplying the place of one of the physicians of the *Hôtel-Dieu* who is sick, has had an opportunity of treating a large number of patients afflicted with the epidemic: the number in twenty days amounted to 1050. Besides its occult cause, the epidemic principle, M. L. recognises also as causes of the influenza, atmospherical variations, and particularly cold combined with moisture. He conceives the disease to depend essentially upon an inflammation of the bronchial mucous membrane, but distinguished by a certain nervous affection—constituting a spasmodic bronchitis. The disease may assume various forms, but it is easy to discover in all cases the same leading concourse of symptoms. Of itself the influenza is always a benign disease; when more serious symptoms develop themselves these are referable to some complication. In two hundred cases of influenza, M. L. observed twenty-five of pneumonia, two of pleurisy, three of gastro-enteritis, two of acute rheumatism, and two of parotiditis. He has seen a phthisical patient suffocated upon the attack of spasmodic bronchitis and die asphyxiated—the same has occurred in many old persons labouring under catarrh. The influenza may assume a very serious character in apoplectic subjects, which is explained as well from the cerebral congestion caused by the cough as from the prescription, as it were, of blood-letting in this disease. The complication the most frequently fatal is pneumonia or pleurisy, more especially as blood-letting, although strongly indicated, in such cases, has not the same advantageous effects as under other circumstances. M. L. has found the use of emetic tartar in large doses with bleeding, to be the most efficacious treatment in such cases. He has also found advantage to result in old persons affected with catarrh from the employment of the white oxyde of antimony. M. L. was struck with the tolerance exhibited for the tartar emetic; of eighteen patients to whom it was given in large doses, two only vomited.

M. Louyer Villermay also regards the influenza as a slight disease. He does not join in the opposition which some physicians evince to the use of blood-let-

ting, from which he has obtained great advantage whenever the pulse was full and developed, and the respiration oppressed, &c. The disease was in that manner cured in three days; the blood presented a firm coagulum, and often a thick buffy coat.

M. Récamier referred to the epidemic of 1803, which was very fatal. The course of the disease was then most frequently by a cutaneous inflammation. M. R. regards the influenza as an affection of the nature of the eruptive fevers. This opinion is not founded merely upon the phenomena of the epidemic of 1803, but upon the concurrence of symptoms which are analogous in the two classes of disease. The catarrh common to influenza is in effect the *catarrhe tупісіеux* of scarlatina; and if in 1837 the cutaneous eruption was not general, very often an erysipelatous redness was observed, and pustules of the lips were invariably present. Finally, it is known that in the eruptive fevers, the eruption does not always occur, but that the nature of the disease is not in consequence changed. The eruption, besides, may take place in the interior; this was the case in 1803, when the digestive mucous membrane, as well as the exterior of the body was the seat of the eruption. The internal eruption had all the characteristics of the lesion so well described by Ræderer and Wagler. Whenever an epidemic prevails with any degree of severity, it always leaves after it indelible traces; thus since the epidemic of 1803, M. R. has seen an increase of the intestinal eruptions. M. Récamier distinguishes in the phenomena of influenza the leading forms: in the first, the inflammatory form, the persons affected are generally strong and robust, with a hard resisting pulse, there is acute pain of the head, difficult respiration, and the base of the chest being, as it were, bound with a cord. In this form bleeding is loudly demanded. M. R. has repeated it from four to six times, and he has seen the blood become more and more coagulable in proportion as the bleedings were repeated, a character different from what is observed in pleurisy and pneumonia, and which seems peculiar to influenza. In the second form, the bilious, there is a bitter taste in the mouth, the tongue is white, pasty, and covered with a mucous coating; the pulse has neither form nor resistance; the disease principally affects the digestive organs. Here emetics are indicated and their effects are immediate. M. R. has seen all the symptoms disappear in twenty-four hours under this treatment. Purgatives are much less efficacious, which is easily understood, inasmuch as the emetic, besides the evacuation it produces, causes also diaphoresis, which is the genuine crisis of the disorder. The third form of influenza M. R. terms the nervous. There is here extreme nervous excitement, loss of sleep, transient pains of the limbs and trunk, the pulse is small and depressed; and the prostration of the patient considerable. In such cases bleeding is positively forbidden. M. R. has seen it under such circumstances increase the intensity of pneumonia. Under this form the influenza is a very grave disease; the patients often sink before any means can be employed to excite reaction. What M. R. has found the most successful in such cases is the use of baths.

M. Piorry recognises different phases in the epidemic. He has observed the pulmonary inflammation to extend deeper and deeper, confined at first to the first divisions of the bronchi, it has subsequently reached its final ramifications, which is the grade of the disease now prevailing. M. P. has used, without success, the tart. ant. in large doses in the pneumonia accompanying the influenza, especially in old persons. He has not been more successful in the use of blood-letting even when repeated at short intervals.

M. Bouillaud, without denying a special epidemic cause giving rise to influenza, discovers in the atmospheric constitution a sufficient explanation of its production and propagation. He does not deny but that the epidemical diseases in general stamp upon all intercurrent diseases their own peculiar characteristics; nevertheless, he believes that this proposition has been exaggerated. He has not as yet collected a sufficient number of facts to be able to pronounce with certainty upon the particular character ascribed to the pneumonia accompanying the influenza, but perhaps sufficient to show that repeated bleedings have not the same beneficial effect as in common pneumonia. M. B. cited especially the case of a physician 68 years old, in whom bleeding repeated at short intervals quickly cured a pneumonia of the most serious character. M. B. observed that since the invasion of the epidemic more patients had died under his care than there had during the preceding eight months.